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(F	Requestor's Name)
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PłCK-UP	WAIT MAIL
(E	Business Entity Name)
(C	Document Number)
Certified Copies	Certificates of Status
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SECRETARY OF STATE

C. LEWIS NOV 1 2011 EXAMINER

COVER LETTER

TO: Registration Division of C	Section Corporations		
_{SUBJECT:} Nanr	ny's House		
		ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corre	spondence concerning this mat	er to the following:	
Norma I	Hines and Katie J		
		Name of Person	
Nanny's	House		
		Firm/Company	
546 Rus	mor Street		
		Address	
Orange Pa	ark, FL 32073		
		y/State and Zip Code	
talktonann	y@gmail.com		
		or future annual report notification}	
For further information	n concerning this matter, please	e call:	
Katie Johns		at (904) 607-0296	
Nam	e of Person	Area Code & Daytime Telephone Number	
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Silfonco Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	&
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name:

The name of the Limited Liability Company is:

Nanny's House, LLC	
(Must end with the words "I imited I ishility Company "I I C " or "I I C ")	

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
546 Rusmor Street	546 Rusmor Street
Orange Park, FL 32073	Orange Park, FL 32073

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Norma Hines

Name

546 Rusmor Street

Florida street address (P.O. Box NOT acceptable)

Orange Park

City. State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Norma Hines	
.	546 Rusmor Street	
	Orange Park, FL 32073	
MGRM	Katie Johns	
	546 Rusmor Street	
	Orange Park, FL 32073	
		
Use attachment if necessary)		
LE V: Effective date, if other than t	he date of filing:	. (OPTION

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Katie Johns

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)